Process a Reenlistment/Extension Packet and Conduct a Retention Ceremony

Conduct a Retention Ceremony

- **Pre-Ceremonial Planning Considerations**
- **Immediately Prior to the Ceremony**
- **Conduct of the Ceremony**
- **Post-Ceremonial Duties**

Reenlistment Documents

- DA Form 3340-R
- DA Form 3072-R (when applicable)
- DD Form 4 series
- DA Form 3286
- DA Form 4789 (when applicable)
- DD Form 256A
- DA Form 5612 (when applicable)
- DA Form 5689

DD Form 4 Series

IMMEDIATE REENLISTMENT

ENLISTMENT/REENLISTMENT DOCUMENT
ARMED FORCES OF THE UNITED STATES

PRIVACY ACT STATEMENT

AUTHORITY: 5 USC 3331, 32 USC 708, 44 USC 708 and 3101; 10 USC 133, 265, 275, 504, 508, 510, 591, 672(d), 678, 837, 1007, 1071 through 1087, 1168, 1169, 1475 through 1480, 1553, 2107, 2122, 3012, 5031, 8012, 8033, 8496, and 9411; 14 USC 351 and 632, and Executive Orders 9397, November 1943 (SSN).

PRINCIPAL PURPOSES: To record enlistment or reenlistment into the U. S. Armed Forces. This information becomes a part of the subject's military personnel records which are used to document promotion, reassignment, training, medical support, and other personnel management actions. The purpose of soliciting the SSN is for positive identification.

ROUTINE USES: This form becomes a part of the Service's Enlisted Master File and Field Personnel File. All uses of the form are internal to the relevant Service.

DISCLOSURE: Voluntary; however, failure to furnish personal identification information may negate the enlistment/reenlistment application.

A. ENLISTEE / REENLISTEE IDENTIFICATION DATA

1. NAME *(Last, First, Middle)*	2. SOCIAL SECURITY NUMBER
ROBERTSON ROBERT RAY	900-00-0018
3. HOME OF RECORD *(Street, City, State, ZIP Code)*	**4. PLACE OF ENLISTMENT/REENLISTMENT** *(Mil. Installation, City, State)*
55 HANG TEN ST. MIAMI, FL 33169	CO B, 3D BN, 63D ARMOR APO AE 09033

5. DATE OF ENLISTMENT/ REENLISTMENT *(YYMMDD)*	6. DATE OF BIRTH *(YYMMDD)*	7. PREV MIL SVC UPON ENL/REENLIST	YEARS	MONTHS	DAYS
		a. Total Active Military Service	03	05	29
2006 JAN 20	1983 MAR 21	b. Total Inactive Military Service	00	03	17

DD Form 4 Series

B. AGREEMENTS

8. I am enlisting/reenlisting in the United States *(list branch of service)* **ARMY** for **3** this date for **E4** years and **A, B, C** weeks beginning in pay grade _____. The additional details of my enlistment/reenlistment are in Section C and Annex(es) _____.

a. **FOR ENLISTMENT IN A DELAYED ENTRY/ENLISTMENT PROGRAM (DEP)**:
I understand that I wil l be ordered to active duty as a Reservist unless I report to the place shown in item 4 above by *(list date (YYMMDD))* _____ for enlistment in the Regular component of the United States *(list branch of service)* _____ for not less than _____ years and _____ weeks. My enlistment in the DEP is in a nonpay status. I understand my period of time in the DEP is **NOT** creditable for pay purposes upon entry into a pay status. However, I also understand that this time is counted toward fulfillment of my military service obligation or commitment. I must maintain my current qualifications and keep my recruiter informed of any changes in my physical or dependency status, moral qualifications, and mailing address.

(1) CONUS STATION-OF-CHOICE REENLISTMENT OPTION (FT CARSON, CO) (P0CC) RCN: 0010000.

(2) SRB 0.5A, MOS 19K.

b. Remarks: *(if none, so state.)*

(3) NO WAIVER.

(4) 1ST REENLISTMENT.

(5) LUMP SUM BONUS IAW MILPER MESSAGE 05-XXX.

c. The agreements in this section and attached annex(es) are all the promises made to me by the Government. **ANYTHING ELSE ANYONE HAS PROMISED ME IS NOT VALID AND WILL NOT BE HONORED.**

(Initials of Enlistee/Reenlistee) RRR . *(Continued on reverse side.)*

DD Form 4/1, MAY 88 *Previous editions may be used.*

DD Form 4 Series

NAME OF ENLISTEE/REENLISTEE *(Last, First, Middle)*	SOCIAL SECURITY NO. OF ENLISTEE/REENLISTEE
ROBERTSON ROBERT RAY	900-00-0018

D. CERTIFICATION AND ACCEPTANCE

13a. My acceptance for enlistment is based on the information I have given in my application for enlistment. If any of that information is false or incorrect, this enlistment may be voided or terminated administratively by the Government or I may be tried by a Federal, civilian, or military court and, if found guilty, may be punished.

I CERTIFY THAT I HAVE CAREFULLY READ THIS DOCUMENT. ANY QUESTIONS I HAD WERE EXPLAINED TO MY SATISFACTION. I FULLY UNDERSTAND THAT ONLY THOSE AGREEMENTS IN SECTION B OF THIS DOCUMENT OR RECORDED ON THE ATTACHED ANNEX(ES) WILL BE HONORED. ANY OTHER PROMISES OR GUARANTEES MADE TO ME BY ANYONE ARE WRITTEN BELOW: *(If none, enter "NONE" and initial.)* **X NONE RRR** (Initials of enlistee/reenlistee)

b. SIGNATURE OF ENLISTEE/REENLISTEE	c. DATE SIGNED *(YYMMDD)*
Robert Ray Robertson	2006 JAN 20

14. SERVICE REPRESENTATIVE CERTIFICATION

a. On behalf of the United States *(list branch of service)* ARMY _____,

I accept this applicant for enlistment. I have witnessed the signature in item 13b to this document. I certify that I have explained that only those agreements in Section B of this form and the attached Annex(es) will be honored, and any other promises made by any person are not effective and will not be honored.

b. NAME *(Last, First, Middle)*	c. PAY GRADE	d. UNIT/COMMAND NAME
DOE, JOHN L. (J-2461)	E6	HHC, 3D BN, 63D ARMOR
e. SIGNATURE	**f. DATE SIGNED *(YYMMDD)***	**g. UNIT/COMMAND ADDRESS *(City, State, ZIP Code)***
John L. Doe	2006 JAN 20	APO AE 09033

DD Form 4 Series

E. CONFIRMATION OF ENLISTMENT OR REENLISTMENT

15. IN THE ARMED FORCES EXCEPT THE NATIONAL GUARD (ARMY OR AIR):
I, ROBERT RAY ROBERTSON, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; and that I will obey the orders of the President of the United States and the orders of the officers appointed over me, according to regulations and the Uniform Code of Military Justice. So help me God.

16. IN THE NATIONAL GUARD (ARMY OR AIR):
I, _____, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the State of _____ _____ against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; and that I will obey the orders of the President of the United States and the Governor of _____, and the orders of the officers appointed over me, according to law and regulations. So help me God.

17. IN THE NATIONAL GUARD (ARMY OR AIR):
I do hereby acknowledge to have voluntarily enlisted/reenlisted this _____ day of _____ _____, 19 _____ in the _____ National Guard and as a Reserve of the United States *(list branch of service)* _____ with membership in the _____ _____ National Guard of the United States for a period of _____ years, _____ months, _____ days, under the conditions prescribe by law, unless sooner discharged by proper authority.

18a. SIGNATURE OF ENLISTEE/REENLISTEE	b. DATE SIGNED *(YYMMDD)*
Robert Ray Robertson	2006 JAN 20

19. ENLISTMENT / REENLISTMENT OFFICER CERTIFICATION
a. The above oath was administered, subscribed, and duly sworn to (or affirmed) before me this date

b. NAME *(Last, First, Middle)*	c. PAY GRADE	d. UNIT/COMMAND NAME
WALLACE, RON	O-3	CO B, 3D BN, 63D ARMOR
e. SIGNATURE	**f. DATE SIGNED *(YYMMDD)***	**g. UNIT/COMMAND ADDRESS *(City, State, ZIP Code)***
Ron Wallace	2006 JAN 20	APO AE 09033

DD Form 4/2, MAY 88 Previous editions may be used.

DA Form 3286

STATEMENTS FOR ENLISTMENT

(PARTS I THROUGH IV)

For use of this form, see AR 601-280; the proponent agency is ODCSPER

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Section 504, 505, 508, and 510, Title 10, USC.
PRINCIPAL PURPOSE: To determine eligibility for reenlistment.
ROUTINE USES: Information may be referred to appropriate authorities if disciplinary action or discharge for fraudulent enlistment/reenlistment is appropriate.
DISCLOSURE: Disclosure of personal information is voluntary, however, failure to furnish information requested may result in denial of reenlistment in the US Army.

PART I - GENERAL STATEMENT OF UNDERSTANDING

TO BE COMPLETED BY ALL APPLICANTS FOR REENLISTMENT IN THE REGULAR ARMY

1. ACKNOWLEDGEMENT: In connection with my reenlistment in the Regular Army, I hereby acknowledge that::

a. All promises made to me are contained in Item 10 of DD Form 4, my reenlistment agreement, and Part II of this statement.

b. I have not been guaranteed attendance at an MOS-producing Army service school or Airborne training unless the title of the school course or Airborne training has been entered in Item 10, DD Form 4.

c. Should I make any material omission or misstatement of fact in connection with any of my enlistment documents, (1) I may be subject to early separation from this enlistment, or (2) I will complete, if permitted, the period for which I enlisted in any assignment deemed appropriate in accordance with the needs of the Army.

d. Should I choose an option which requires a security clearance and I am not granted such clearance after I have enlisted, or my granted clearance is revoked after I have enlisted, I agree to accept any assignment in accordance with the needs of the Army and I will complete the period for which I enlisted.

e. Law violations for which I have been convicted or have had adverse adjudications as a juvenile or youthful offender may be cause for denial of security clearance.

substantial part of

the specific command. I

DA Form 3286

h. My acceptance for enlistment carries no promise whatsoever relative to furnishing transportation for dependents to oversea commands
or to the furnishing of family quarters either in oversea commands or in the continental United States.

i. If, after my enlistment for a specific option, I should fail to meet required qualifications which cannot be determined prior to my
enlistment, I understand that I will not be offered another enlistment option, but will be trained and assigned in accordance with the
needs of the Army and will be required to complete the term of service for which I enlisted.

j. If, after my enlistment in the Regular Army, I should waive my initial enlistment option as listed in item 10, DD Form 4, and in Part II of
my statement for enlistment for any reason whatsoever, this initial option will not be reinstated at a later date.

k. I am not consciously opposed, by reason of religious training or belief, to bearing arms or to participation, or training for war in any
form.

CONUS STATION-OF-CHOICE

l. I am aware that in the event of armed conflict involving the United States, the Secretary of the Army may declare null and void any
portion of my enlistment option pertaining to training, assignment, or duty, if he determines such action to be necessary.

FORT CARSON, COLORADO

PART II - IN-SERVICE REENLISTMENT OPTION

TO BE COMPLETED BY APPLICANT REENLISTING FOR A SPECIFIC OPTION

2. In connection with my reenlistment in the Regular Army for the

_____

Reenlistment option, I hereby acknowledge that provided I meet required prerequisites I will be assigned as follows:

Minimum 12 months stabilization at Ft Carson, beginning the date I arrive. END RRR

_____

3. I have read and understand the provisions of the reenlistment option for which I am reenlisting. Furthermore, to avoid misunderstandings, I have recorded below in my own words and handwriting all spoken and written promises that have been made to
me in connection with my enlistment in the Regular Army *(at end of statement, applicant will print the word "END").*

DA FORM 3286, DEC 94 EDITION OF SEP 79 IS OBSOLETE

ANNEX A

4. If reenlisting for the CONUS Station of Choice Reenlistment Option, I understand that my stabilization will commence on date of

Stabilizat

work my

is

Period

DA Form 3286

5. In the event my enlistment commitment cannot be fulfilled, the alternatives available to me will be as provided in AR 635-200, as of the
date of my claim of unfulfilled enlistment commitment or erroneous enlistment is submitted. I understand that I will have a period of 30
days to elect an alternative or to request other training or assignment from the date I am advised that my selected option cannot be
fulfilled or, where not formally advised, from the date I discover or should have discovered the grounds for submitting a claim. This period
may be extended by the general courts-martial convening authority when necessary to determine the availability of my selected alternative.
If I make no election within that period, my claim will be deemed to have been waived. I may withdraw any request for training or
reassignment prior to approval and elect another alternative, but not thereafter.

☐ ☒

PART III - STATEMENT OF LAW VIOLATIONS AND PREVIOUS CONDITIONS

6. Complete the statement in a below and answer questions b through f as appropriate, by placing a checkmark under the "YES" or "NO"
column. In-service personnel immediately enlisting will list those violations occurring during current term of service, except for offenses not
previously revealed.

	YES	NO
		X
a. I have read, or have had explained to me, paragraphs 2-4 and 7-4, AR 604-10, which set forth the criteria *(reasons)* for discharge and types of discharge and certify that I have have not *(check one)* engaged in disloyal or subversive activities as defined herein.		X
b. Have you ever been rejected for enlistment or induction in any of the Armed Forces to include failure of the mental examinations administered by any AFEES, or been discharged from previous service under other than honorable conditions, under Personnel Security Regulations, or by reason of unsuitability, or undesirable habits or traits of character, or for medical reasons?		X
c. Have you ever been arrested, cited, charged or held by Federal, State, County, City or other law enforcement authorities or by Juvenile Court of Juvenile Probation Officials for any violation of any Federal Law, State Law, County or Municipal Law, Regulation or Ordnance?		X
d. Have you ever been convicted of a felony or any other offense, or adjudicated a youthful or juvenile delinquent?		X
e. Have you ever been imprisoned under sentence of any court?		

DA Form 3286

8. **UNDERSTANDING.** I understand that should I intentionally conceal or misrepresent any information regarding my record of arrests or
convictions or juvenile court adjudications, I may later be subject to disciplinary action under the Uniform Code of Military Justice (UCMJ)
and/or discharged from the Service under other than honorable conditions.

PART IV - DEPENDENCY STATEMENT

TO BE COMPLETED BY ALL APPLICANTS

9. Relationship and age of all persons who are dependent upon me for support are recorded below *(If none, so state)*:

RELATIONSHIP	AGE	RELATIONSHIP	AGE	RELATIONSHIP	AGE
Wife	**25**				
Daughter	**3**				

10. **UNDERSTANDING**: I understand that if I am selected for enlistment in the Regular Army, I will be expected to accept such assignments
as are in the best interest of the Service regardless of marital status and/or responsibility for dependents; and that it is my responsibility
to make appropriate arrangements for the care of my dependents should I be required to perform duty in an area where dependents are
not authorized.

11. I have read and understand the meaning of all statements contained in Parts I through IV of the form and agree to all conditions set forth
therein. I certify that all answers to questions, statements, and entries on the form are true, correct, and complete, and that the Career
Counselor has informed me that should I intentionally conceal any information required above, I may later be subject to disciplinary
action or discharge upon its discovery.

DA FORM 3286, DEC 94

DA Form 4789

STATEMENT OF ENTITLEMENT TO SELECTIVE REENLISTMENT BONUS

For use of this form, see AR 600-200; the proponent agency MILPERCEN.

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Section 308 of Title 37, US Code, as amended by Public Law 93-277, Armed Forces Enlisted Personnel Bonus Revision Act of 1974, 10 May 1974, Public Law 95-57, 29 June 1977, and Public Law 95-485, 20 October 1978.

PRINCIPAL PURPOSE: To explain the conditions under which continued entitlement to unpaid installments of the bonus may be terminated and unearned portion of advanced bonus payments recouped.

ROUTINE USES: Information may be referred to appropriate authorities if individual becomes subject to termination and/or recoupment of bonus.

DISCLOSURE: Disclosure of personal information is voluntary. However, failure to furnish information requested may result in denial of reenlistment in the Army.

I ROBERT RAY ROBERTSON (Full name) 900-00-0018 (SSN)

understand that I am getting a selective reenlistment bonus in return for my (reenlistment) (extension) in MOS 19K for a period of 4 YEARS (_____ months) (_____ years).

I agree to complete this period of service.

I have been advised and understand that if I do not complete the full period of service, or if I do not remain technically qualified in MOS 19K, I will not get any more installments of the bonus, and I will have to pay back as much of the bonus as I already received for the unexpired part of the period of obligated service.

I understand that I will be considered *NOT* technically qualified in MOS 19K when I am no longer classified in that MOS and my current and future assignment in that MOS is precluded for any of the following reasons within my control:

DA Form 4789

a. I refuse to perform certain duties which I volunteered for in writing prior to my accepting the bonus and which are required for effective performance in the MOS;

b. Disciplinary action taken under UCMJ or civil court conviction disqualifies me for future performance in the MOS;

c. My own misconduct causes injury, illness, or some other condition which interferes with effective performance in the MOS;

d. Withdrawal of the minimum security clearance, loss of qualification under the Personnel Reliability Program (PRP), or loss of any other mandatory qualification required for effective performance in the MOS.

SIGNATURE OF BONUS RECIPIENT

Robert Ray Robertson — ROBERT RAY ROBERTSON, SPC

SIGNATURE OF REENLISTMENT OFFICER

Ron Wallace — RON WALLACE, CPT

DATE	TIME	STATION
2006 JAN 20	0900	APO AE 09033

DA FORM 1 JUN 79 4789
ANNEX C

United States Army

OATH OF REENLISTMENT

I, ROBERT RAY ROBERTSON do solemnly swear (or affirm) that I will support and defend the constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; and that I will obey the orders of the President of the United States and the orders of the Officers appointed over me, according to regulations and the uniform code of military justice.
So help me God!

Robert Ray Robertson	20 JANUARY 2006	Ron Wallace
REENLISTEE	DATE	ADMINISTERING OFFICER

Honorable Discharge

from the Armed Forces of the United States of America

This is to certify that

ROBERT RAY ROBERTSON SPECIALIST REGULAR ARMY

was Honorably Discharged from the

United States Army

on the 19TH *day of* JANUARY 2006 *This certificate is awarded*

as a testimonial of Honest and Faithful Service

Ron Wallace

RON WALLACE
CPT, AR

DEPARTMENT OF THE ARMY

CERTIFICATE OF APPRECIATION

To

ROBERTA R. ROBERTSON

on the occasion of the reenlistment of your spouse I wish to extend to you my personal gratitude and the appreciation of the United States Army for the assistance you have provided during the Army service of your spouse. The Army family life is a special experience with its own unique rewards and challenges. I share your pride in the contributions you have made, and I trust that you will support your spouse's decision and objectives in continuing an Army career.

JANUARY 20, 2006
DATE

Ron Wallace
RON WALLACE, CPT, AR

Extension Documents

- **DA Form 3340-R**
- **DA Form 3072-R (when applicable)**
- **DA Form 1695**

DA Form 1695

OATH OF EXTENSION OF ENLISTMENT

(For use of this form, see AR 601-280; the proponent agency is DCSPER)

APPLICANT DATA

NAME *(Last, First, Middle)*	RANK	SSN
SNYDER, SAMUEL STEPHEN	SGT	900-00-0019

PLACE OF EXTENSION *(Unit, Installation, State, ZIP Code)*	EXTENSION CONTROL NUMBER *(If Applicable)*
HHC, 1ST BDE, FT CAMPBELL, KY 45347	0000010

AGREEMENT

I, a member of the Regular Army, do hereby acknowledge that I voluntarily extended my 5 YEAR enlistment of the 15TH day of JANUARY 2006, for a period of 6TH FEBRUARY 2004, as a soldier in the Regular Army of the United States to a period of 05 years 11 months 00 weeks, the last mentioned date. The period of this extension is 11 months and my new ETS date is 5 JANUARY 2010.

(Enter current enlistment as extended)

My request for extension is TO MEET THE SRR FOR A "WITH DEPENDENT" TOUR TO GERMANY

(Specify reason)

Up paragraph 4-9a chapter 4, AR 601-280.

(Appropriate paragraph)

DA Form 1695

FULL SIGNATURE OF APPLICANT	DATE SIGNED
Samuel Steven Snyder	2006 JAN 15

RESPONSIBLE CAREER COUNSELOR

TYPED NAME *(Last, First, MI)*	RANK	SSN	UNIT *(Unit, Installation, State, ZIP Code)*
STOCKWELL, ASHLY N.	SSG	S-0389	HHC, 1ST BDE FT CAMPBELL, KY 45347-5010

REMARKS

ADMINISTERING OFFICER

Subscribed to before me this 15TH day of JANUARY, 2006.

TYPED NAME *(Last, First, MI)*	RANK
SNEAD, LLOYD R.	CPT

SIGNATURE	UNIT *(Unit, Installation, State, ZIP Code)*
Lloyd R. Snead	HHC, 1ST BDE FT CAMPBELL, KY 45347-5010

DA FORM 1695, MAY 1998 EDITION OF AUG 86 IS OBSOLETE.

Process a Reenlistment/Extension Packet and Conduct a Retention Ceremony